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| UN<br>—   | NITED STATES BANKI DISTRICT C  | RUPTCY COURT  OF New Jersey   |
|---|--|---|
| In Re. Harmon of Melville, Inc.   | \$<br>\$   | Case No. 23-13415   |
| Debtor(s)   |  | Lead Case No. 23-13359  |
| <b>Monthly Operating Repor</b>  | rt   | Chapter 11  |
| Reporting Period Ended: 09/30/2023  |  | Petition Date: <u>04/23/2023</u>  |
| Months Pending: 5   |  | Industry Classification: 4 4 2 2  |
| Reporting Method:   | Accrual Basis  | Cash Basis  |
| Debtor's Full-Time Employees (current)  | :  | 0   |
| <ul> <li>Statement of operations (profit of Accounts receivable aging</li> <li>Postpetition liabilities aging</li> </ul>  | all that are attached): red schedules must be provided on lisbursements mmary and detail of the assets, 1 or loss statement) | a non-consolidated basis for each debtor) liabilities and equity (net worth) or deficit |
| ☐ Statement of capital assets ☐ Schedule of payments to profess ☐ Schedule of payments to insider ☐ All bank statements and bank re ☐ Description of the assets sold or  /s/ Michael Goldberg | s<br>conciliations for the reporting p<br>transferred and the terms of the   |   |
| Signature of Responsible Party  |  | Printed Name of Responsible Party   |
| 10/24/2023  |  |   |

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.

201 East Las Olas Boulevard Suite 1800 Fort

Laurderdale FL 33301

Address

Date

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Debtor's Name Harmon of Melville, Inc.

| Pa | rt 1: Cash Receipts and Disbursements  | <b>Current Month</b> | Cumulative |
|----|--|----------------------|------------|
| a. | Cash balance beginning of month  | \$0                  |            |
| b. | Total receipts (net of transfers between accounts)   | \$0                  | \$0        |
| c. | Total disbursements (net of transfers between accounts)  | \$0                  | \$0        |
| d. | Cash balance end of month (a+b-c)  | \$0                  |            |
| e. | Disbursements made by third party for the benefit of the estate  | \$0                  | \$0        |
| f. | Total disbursements for quarterly fee calculation (c+e)  | \$0                  | \$0        |
|    | rt 2: Asset and Liability Status ot generally applicable to Individual Debtors. See Instructions.)           | <b>Current Month</b> |            |
| a. | Accounts receivable (total net of allowance)   | \$0                  |            |
| b. | Accounts receivable over 90 days outstanding (net of allowance)  | \$0                  |            |
| c. | Inventory (Book • Market Other (attach explanation))   | \$0                  |            |
| d  | Total current assets   | \$0                  |            |
| e. | Total assets   | \$0                  |            |
| f. | Postpetition payables (excluding taxes)  | \$0                  |            |
| g. | Postpetition payables past due (excluding taxes)   | \$0                  |            |
| h. | Postpetition taxes payable   | \$0                  |            |
| i. | Postpetition taxes past due  | \$0                  |            |
|    | Total postpetition debt (f+h)  | \$0                  |            |
| J. | Prepetition secured debt   | \$0                  |            |
| k. | •  |                      |            |
| 1. | Prepetition priority debt  | \$0                  |            |
| m. | Prepetition unsecured debt   | \$0                  |            |
| n. | Total liabilities (debt) (j+k+l+m)   | \$0                  |            |
| о. | Ending equity/net worth (e-n)  | \$0                  |            |
| Pa | rt 3: Assets Sold or Transferred   | <b>Current Month</b> | Cumulative |
| a. | Total cash sales price for assets sold/transferred outside the ordinary course of business                   | \$0                  | \$0        |
| b. | Total payments to third parties incident to assets being sold/transferred                                    |                      |            |
|    | outside the ordinary course of business  Net cash proceeds from assets sold/transferred outside the ordinary | \$0                  | \$0        |
| c. | course of business (a-b)   | \$0                  | \$0        |
| Pa | rt 4: Income Statement (Statement of Operations)   | <b>Current Month</b> | Cumulative |
|    | ot generally applicable to Individual Debtors. See Instructions.)  |                      |            |
| a. | Gross income/sales (net of returns and allowances)   | \$0                  |            |
| b. | Cost of goods sold (inclusive of depreciation, if applicable)  | \$0                  |            |
| c. | Gross profit (a-b)   | \$0                  |            |
| d. | Selling expenses   | \$0                  |            |
| e. | General and administrative expenses  | \$0                  |            |
| f. | Other expenses   | \$0                  |            |
| g. | Depreciation and/or amortization (not included in 4b)  | \$0                  |            |
| h. | Interest   | \$0                  |            |
| i. | Taxes (local, state, and federal)  | \$0                  |            |
| ;  | Reorganization items   | \$0                  |            |
| J. | Profit (loss)  | \$0                  | \$0        |

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Debtor's Name Harmon of Melville, Inc.

| 113. 110 | fessional Fees and Expenses            |                           |                           |                     |                       |                    |
|----------|--|---------------------------|---------------------------|---------------------|-----------------------|--------------------|
|          |  |                           | Approved<br>Current Month | Approved Cumulative | Paid Current<br>Month | Paid<br>Cumulative |
| Debt     | or's professional fees & expenses (bar | nkruptcy) Aggregate Total |                           |                     |                       |                    |
| Itemi    | zed Breakdown by Firm                  |                           |                           |                     |                       |                    |
|          | Firm Name                              | Role                      |                           |                     |                       |                    |
| i        |  |                           |                           |                     |                       |                    |
| ii       |  |                           |                           |                     |                       |                    |
| iii      |  |                           |                           |                     |                       |                    |
| iv       |  |                           |                           |                     |                       |                    |
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Debtor's Name Harmon of Melville, Inc.

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|    |        |                                     |                                | Approved<br>Current Month | Approved<br>Cumulative | Paid Current<br>Month | Paid<br>Cumulative |
|----|--------|-------------------------------------|--------------------------------|---------------------------|------------------------|-----------------------|--------------------|
| b. | Debto  | or's professional fees & expenses ( | nonbankruptcy) Aggregate Total |                           |                        |                       |                    |
|    | Itemiz | Itemized Breakdown by Firm          |                                |                           |                        |                       |                    |
|    |        | Firm Name                           | Role                           |                           |                        |                       |                    |
|    | i      |                                     |                                |                           |                        |                       |                    |
|    | ii     |                                     |                                |                           |                        |                       |                    |
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Case No. 23-13415

|    | xcix  |  |     |     |     |     |  |
|----|---|--|-----|-----|-----|-----|--|
|    | С   |  |     |     |     |     |  |
| c. | c. All professional fees and expenses (debtor & committees) |  | \$0 | \$0 | \$0 | \$0 |  |

| Pa | rt 6: Postpetition Taxes  | Current Month   | Cumulative                |
|----|---|-----------------|---------------------------|
| a. | Postpetition income taxes accrued (local, state, and federal)   | \$0             | \$0                       |
| b. | Postpetition income taxes paid (local, state, and federal)  | \$0             | \$0                       |
| c. | Postpetition employer payroll taxes accrued   | \$0             | \$0                       |
| d. | Postpetition employer payroll taxes paid  | \$0             | \$0                       |
| e. | Postpetition property taxes paid  | \$0             | \$0                       |
| f. | Postpetition other taxes accrued (local, state, and federal)  | \$0             | \$0                       |
| g. | Postpetition other taxes paid (local, state, and federal)   | \$0             | \$0                       |
| Pa | rt 7: Questionnaire - During this reporting period:   |                 |                           |
| a. | Were any payments made on prepetition debt? (if yes, see Instructions)  | Yes O No •      |                           |
| b. | Were any payments made outside the ordinary course of business without court approval? (if yes, see Instructions) | Yes C No •      |                           |
| c. | Were any payments made to or on behalf of insiders?   | Yes O No •      |                           |
| d. | Are you current on postpetition tax return filings?   | Yes   No        |                           |
| e. | Are you current on postpetition estimated tax payments?   | Yes   No        |                           |
| f. | Were all trust fund taxes remitted on a current basis?  | Yes   No        |                           |
| g. | Was there any postpetition borrowing, other than trade credit? (if yes, see Instructions)                         | Yes O No •      |                           |
| h. | Were all payments made to or on behalf of professionals approved by the court?                                    | Yes No No N/A • |                           |
| i. | Do you have: Worker's compensation insurance?   | Yes   No        |                           |
|    | If yes, are your premiums current?  | Yes   No   N/A  | (if no, see Instructions) |
|    | Casualty/property insurance?  | Yes   No        |                           |
|    | If yes, are your premiums current?  | Yes   No N/A    | (if no, see Instructions) |
|    | General liability insurance?  | Yes   No        |                           |
|    | If yes, are your premiums current?  | Yes   No   N/A  | (if no, see Instructions) |
| j. | Has a plan of reorganization been filed with the court?   | Yes   No        |                           |
| k. | Has a disclosure statement been filed with the court?   | Yes   No        |                           |
| 1. | Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930?                             | Yes   No        |                           |

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Debtor's Name Harmon of Melville, Inc.

Case No. 23-13415

| Pa   | rt 8: Individual Chapter 11 Debtors (Only)  |                  |  |  |  |  |
|--|---|------------------|--|--|--|--|
| a.   | Gross income (receipts) from salary and wages   | \$0              |  |  |  |  |
| b.   | Gross income (receipts) from self-employment  | \$0              |  |  |  |  |
| c.   | Gross income from all other sources   | \$0              |  |  |  |  |
| d.   | Total income in the reporting period (a+b+c)  | \$0              |  |  |  |  |
| e.   | Payroll deductions  | \$0              |  |  |  |  |
| f.   | Self-employment related expenses  | \$0              |  |  |  |  |
| g.   | Living expenses   | \$0              |  |  |  |  |
| h.   | All other expenses  | \$0              |  |  |  |  |
| i.   | Total expenses in the reporting period (e+f+g+h)  | \$0              |  |  |  |  |
| j.   | Difference between total income and total expenses (d-i)                                    | \$0              |  |  |  |  |
| k.   | List the total amount of all postpetition debts that are past due                           | \$0              |  |  |  |  |
| 1.   | Are you required to pay any Domestic Support Obligations as defined by 11 U.S.C § 101(14A)? | Yes O No •       |  |  |  |  |
| m.   | If yes, have you made all Domestic Support Obligation payments?                             | Yes No N/A •     |  |  |  |  |
| Privacy Act Statement  28 U.S.C. § 589b authorizes the collection of this information, and provision of this information is mandatory under 11 U.S.C. §§ 704, 1106, and 1107. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6). The United States Trustee will also use this information to evaluate a chapter 11 debtor's progress through the bankruptcy system, including the likelihood of a plan of reorganization being confirmed and whether the case is being prosecuted in good faith. This information may be disclosed to a bankruptcy trustee or examiner when the information is needed to perform the trustee's or examiner's duties or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." See 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).  I declare under penalty of perjury that the foregoing Monthly Operating Report and its supporting documentation are true and correct and that I have been authorized to sign this report on behalf of the estate. |   |                  |  |  |  |  |
| /s/  | Bradford J Sandler /s/ Br   | adford J Sandler |  |  |  |  |

Printed Name of Responsible Party

10/24/2023

Date

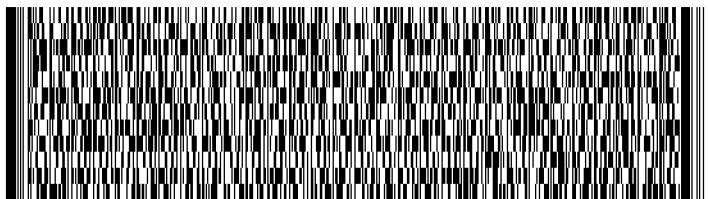
Signature of Responsible Party

Title

Pachulski Stang Ziehl & Jones LLP

Debtor's Name Harmon of Melville, Inc.

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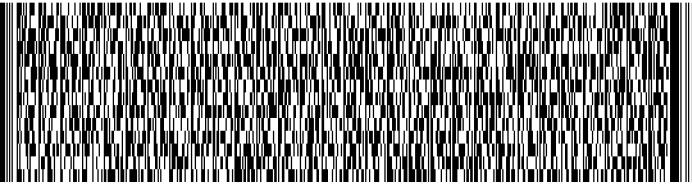
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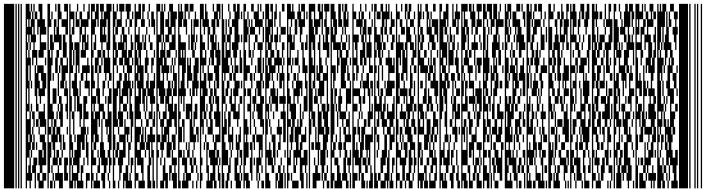
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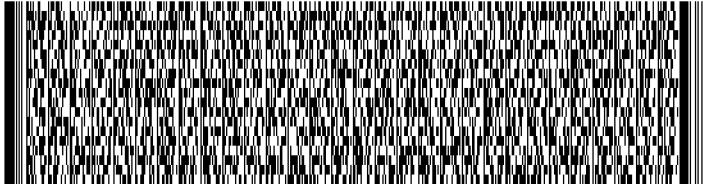
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